PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

E. Confidence of the

Application or Docket Number

10717429

_	·			<u> </u>			/						
CLAIMS AS FILED - PART I (Column 1)						umn 2)		SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			16		1000			RATE	F	Ē	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		•	BASIC F	€ 385	.00	OR	BASIC FEE	770.00
To	OTAL CHARGE	\(\text{minus 20=} \)		• •			X\$ 9=		- 	OR	:X\$18=		
11/1	DĖPENDĖNT (/ minus 3 =		*	φ		X43=			OR	X86≌		
M	JLTIPLE DEPE	PRESENT	RESENT				+145=			OR	+290=	<u> </u>	
* If the difference in column 1 is less tha				ero, enter	"0" in (column 2	. !	TOTAL	38	(OR	TOTAL	
CLAIMS AS AMENDED - PART II											J	OTHER	
·	Τ	(Column 1)	· - -	(Colun		(Column 3)		SMALL			OR	SMALL	ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT	, ,	PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADI TION FE	IAL		RATE	. ADDI- TIONAL FEE
	Total	*	Minus	**	:	= .		X\$ 9=			OF	X\$18=	
	Independent	* ENTATION OF MI	Minus	PENDENT	CLAIM	[=		X43=			OR	X86=	
	1	INTO TO TO THE	CHECE DEFENDENT		·			+145=			OR	+290=	
						-	٤	TOTAL		\neg	OR ,	TOTAL ADDIT. FEE	
				<u> </u>									
AMENDMENT B		CLAIMS REMAINING AFTER AMENOMENT		HIGHE NUMB PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADC TION FEI	AL		RATE	ADDI- TIONAL FEE
S O N	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=	
AME	Independent	MTATION OF A	Minus	***	<u> </u>	= .		X43=	·		OR	X86=	
	1 mai Prese	NTATION OF MIL	JUINIE DEF	PENDENT	CLATIVI		. [+145=			OR	+290≃	
•							L	TOTAL DOIT. FEE			J. A	TOTAL ODIT, FEE	
		(Column 1)		(Colum	n 2)	(Column 3)							•
Ξ -		CLAIMS REMAINING AFTER * AMENDMENT		HIGHE NUMBI PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI TIONA EEE	AL.		RATE	ADDI- TIONAL
	Total	4	Minus	4.4		=		X\$ 9=			DR	X\$18=	مستنب المستنب
	Independent	•	Minus	44.4			-	X43=		-	-	X86=	
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									$ $ c	OFF		
• 11	Withou policy in policy of the least the set of the set									Jo	ofi [+290≠	
** 11	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" (N THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" (N THIS SPACE is less than 3, enter "0."]0	IR _{AC}	TOTAL DOO FEE	
		rest Proviousty Paid rest Proviousty Paid					faund	Lin the app	ropnate l	bos in	colun	in 4	1